

# **Governor's Council on Blindness and Visual Impairment (GCBVI)**

*Creating a climate of opportunity where all  
Arizonans who are blind or visually impaired are  
able to direct their own lives and reach their  
personal chosen goals and objectives.*

## **Annual Report**

**2001-2002**

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GOVERNOR'S COUNCIL ON BLINDNESS AND VISUAL IMPAIRMENT  
1789 W. Jefferson 2 NW (930A)  
Phoenix, Arizona 85007

**Janet Napolitano**  
Governor

**Thomas Simmons**  
Chairperson

The Honorable Governor Janet Napolitano  
1700 W Washington  
Phoenix, AZ 85007

Dear Governor Napolitano:

As your advisor and the advisor to the state legislature on the needs of blind and visually impaired, it is with pleasure the Governor's Council on Blindness and Visual Impairment (GCBVI) transmits to you the 2001 to 2002 Annual Report.

Established by Executive Order 86-15 the purpose of the GCBVI is to provide a mechanism to ensure that the specialized needs of blind and visually impaired Arizonans are addressed effectively. We focus primarily on public education as the avenue to address this purpose. Below are just a few highlights of these activities:

- Co-Sponsored the Annual Vision Rehabilitation and Technology Expo (VRATE) open to the public free of charge, focusing on providing information on technology & employment,
- Participated in the 2001 and 2002 Legislative Awareness Days
- Participated in various community activities/advocacy to promote the GCBVI,
- Hosted a statewide Public Relations meeting to design ways to partner & collaborate with organizations to reduce any duplication of services,
- Completed a Strategic Planning Session in February 2002 to establish future priorities,
- Convened a high level task force to review Adjustment Services in Arizona & make recommendations on the needs of children and adults
- Made recommendations to the Department of Education on Best Practices for children in grades K-12,
- Participated in developing the Braille Bill to provide textbook accessibility to blind and visually impaired students in a format suitable to each student,
- Obtained an operating budget to enable the GCBVI to promote & educate the public on issues related to blindness

The GCBVI recognizes the financial constraints currently facing our State and we applaud your commitment to opposing any further reduction in program funding for SFY 2003 considering the deep cuts many programs have already experienced. The three state agencies that receive substantial state

appropriations include the DES/RSA Independent Living Program for the blind, which was reduced by \$100,000 or approximately 19% of the State Fiscal Year 2003 appropriations effective July 1, 2002; the Arizona Schools for the Deaf and the Blind (ASDB) which was forced to make a \$1.5 million reduction for the remainder of SFY 2003; and the Arizona State Library/ Braille and Talking Book Library, also supported by state dollars. All three agencies provide integral services to the blindness community.

Despite the impact of reduced dollars, we are pleased to recognize the support and assistance received from Mr. Skip Bingham, DES/RSA Administrator and his active participation with the GCBVI as a partner.

The goals of the GCBVI for the next few years include continuing to advocate for:

- Adequate funding for the specialized needs and services of blind and visually impaired,
- Adequate numbers of qualified, properly trained and compensated staff to provide quality services to the blind and visually impaired,
- Textbook accessibility for all students regardless of disability (Providing electronic media will substantially reduce costs related to alternative format and allow all students to receive their textbooks at the same time),
- Funding to stabilize the U of A Special Education Rehabilitation program, that prepares teachers in Rehabilitation Teaching, Orientation and Mobility, and Instructional Services.

We look forward to working with you and your designee, and establishing a line of communications with your office to discuss the needs of the blind and visually impaired population in Arizona. I will be calling your office to establish an appointment in the near future.

Respectfully yours,

Tom Simmons, Council Chair  
Governor's Council on Blindness and Visual Impairment

CC: Arizona State Legislature  
Mr. John Clayton, DES Director  
Mr. Patrick Harrington, Assistant Director, DERS  
Mr. Skip Bingham, RSA Administrator

## **INTRODUCTION**

### **COUNCIL PURPOSE**

The Governor's Council on Blindness and Visual Impairment (GCBVI) was created by Executive Order 86-15, in December 8, 1986 and updated in 1992 by Executive Order 92-15 "to provide a mechanism to ensure that the specialized needs of blind and visually impaired Arizonans are addressed effectively." Among other responsibilities, the Council is charged with advising and assisting the Governor, and the legislature, on the needs and services related to blindness and visual impairment. The GCBVI also reviews services provided by all agencies serving individuals who are blind or visually impaired to ensure the specialized needs of this population are being met.

### **VISION AND MISSION**

Vision loss touches everyone, as blind and visually impaired individuals reflect a cross section of the general population. Every seven minutes someone in America will become blind or visually impaired.<sup>1</sup>

Chances are you have a friend or family member who has a vision impairment. Historically, vision loss is the most feared of all disabilities. Myths, superstitions, and incorrect beliefs all impact the sighted persons expectations. Consequently, highly skilled individuals with visual impairment have a difficult time finding employment. The result is that more than 70% of those who are blind and legally blind are unemployed!<sup>2</sup>

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<sup>1</sup> **American Foundation for the Blind**

<sup>2</sup>**Data Source:** National Center for Health Statistics (1998), National Health Interview Survey--Disability Supplement, 1994-95,

Our goal must be to provide the opportunities for people who are blind to have access to a level of education and training commensurate with their individual abilities and desires. We must expand opportunities for blind and visually impaired persons to fully participate in employment.

To this end, the Vision of the GCBVI is to:

*Create a climate of opportunity where all Arizonans who are blind or visually impaired are able to direct their own lives and reach their personal chosen goals and objectives.*

This is the same vision we have for ourselves, as individuals, and our family members. When we level the playing field by providing equal access to information, education, and opportunities provided in an atmosphere free of stereotypes, blind and visually impaired persons can and do achieve this vision. Despite the high unemployment rate within the disability community, there are many blind and visually impaired individuals who work everyday, compete successfully in education and employment with their sighted peers, and participate in community and social activities. Education is **key** to accomplishing the vision of the GCBVI.

The Mission of the GCBVI is:

*To provide the leadership and guidance that promotes opportunities for Arizonans of all ages who are blind or visually impaired that result in increased dignity, respect, and independence.*

The best way to impact a diverse group of people is to have a committee comprised of a diverse group of people. The GCBVI membership represents a broad cross section of the population with interests specific to blindness and visual impairment. From consumers and consumer advocacy groups to state agencies, to the community at large and professionals in the field of vision

loss (see appendix IV), the GCBVI works to build consensus on common issues important to blind and visually impaired individuals, and to promote those issues to the Governor and the legislature, and the public at large.

### **BLINDNESS DEFINED**

While some people believe that the word “blind” means totally lacking in sight, most people who are blind (80%) have some limited sight. A person is defined as “legally blind” when he or she, using corrective lenses, can see at 20 feet or less what a person with 20/20 vision can see at 200 feet, or where the field of vision is less than 20 degrees. A more useful definition is “a vision loss that is severe enough to interfere with the ability to perform everyday tasks or activities and that cannot be corrected to normal by conventional eyeglasses or contact lenses” (Jose, Vision and ageing: Crossroads for service delivery, 1992). Such a person will function efficiently by using alternative techniques to do without sight what the person would do with sight.

“There are no special characteristics which are exclusively limited to blind people, yet society persists in thinking about people with loss of vision as a group set apart from the general population.”

“Blind people reflect a cross section of this general population. With appropriate education and training, and with equal opportunity, many blind people can compete successfully in education and employment with their sighted peers, and participate fully in daily and social activities in their community. Blind people work every day, in business and industry, in law and medicine, as teachers and scholars, in supported employment, and in management and leadership roles”.<sup>3</sup>

## **STRATEGIC PLANNING**

To effect positive changes and facilitate the inclusion and equitable participation of people who are blind or visually impaired in our society, it is essential for the GCBVI to focus its efforts. Focus is achieved by setting priorities. Priorities are established by identifying the crucial elements influencing the lives of people who are blind and then prioritizing those elements in order of importance. In order to accomplish this, the GCBVI met for two days in February 2002, to develop a strategic plan for 2002 to 2004.

Several issues specific to the success of persons with vision loss were identified by the GCBVI, and through consensus, priorities established. Committees were then formed around these issues, with specific goals and objectives identified, along with a plan of action to meet the goals and objectives. These goals will be reviewed periodically to evaluate just how well we are doing in accomplishing the objectives, and modifying where necessary.

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<sup>3</sup> (Berthold Lowenfield on Blindness and Blind People, Selected Papers, 1981).



## **CURRENT WORK OF THE COUNCIL**

In light of the depressed economy over this past year of 2002, the Council has been concerned with maximizing services, reducing duplication where applicable, and encouraging collaboration and partnering where possible. Through consensus building, the Council selected four strategic areas on which to focus efforts, including public relations, education, collaboration and service enhancements. In addition to the stated goals of the committees other important related activities, including the VRATE conference were also a focus of the Council.

Bill Pasco, Director of Sun Sounds  
conducting a workshop at VRATE

## **Committee Goals**

### **Public Relations**

Goal 1: To develop ways to better inform the public about the various services available in Arizona for individuals who are blind or visually impaired.



Activities: The Council hosted a meeting of all service providers and agencies who provide services within the blindness community. Representatives from across the state attended the meeting to identify ways we can work together to maximize resources, and promote services available to the general public.

A listserv was developed for the group to communicate more effectively and efficiently on a number of topics by posting

information on community activities, legislation, medical information, and other activities.

Another outcome of this meeting is the development of a website that will have a common domain name that newly blinded or friends and family members can access for information related to blind services in Arizona and related links.

Goal 2: To develop ways to better inform health care professionals about the various services available in Arizona for individuals who are blind or visually impaired.

Activities: Dr. Lynne Noon, GCBVI member, conducted a workshop at the November 8, 2002 “**Vision Rehabilitation and Technology Expo**” (VRATE) providing continuing medical education credits (CME’s) to professionals and support staff. Optometrists, ophthalmologists and technicians were invited to attend and earn credit for learning about services available for those with visual impairments. The PR committee will continue to seek ways to inform health care providers of services available for their visually impaired clients.

### Education Committee

Goal: Ensure there are suitable numbers of properly trained, motivated and compensated professionals.

Activities: The Council has actively supported continued funding of the University of Arizona Department of Special Education & Rehabilitation School of Psychology to prepare personnel in the field of teaching the blind and visually impaired. We are currently gathering anecdotal stories that describe how properly trained professionals have impacted the lives of blind and visually impaired individuals as a support mechanism for the professional preparation

program. It is estimated there is currently a national need for 5,000 additional teachers of visually impaired students, but only 250 teachers graduate a year.<sup>4</sup>

The committee supported a pay raise for Rehabilitation Counselors working for the Department of Economic Security (DES), Division of Employment and Rehabilitation Services



Tom Simmons, Council Chair, presenting Leon Smith notice of Appointment to the Council

(DERS). We continue to advocate and support the DES in submitting full state matching funds as a critical issue for the Vocational Rehabilitation Program. The Committee also supported amending legislation to include teachers at the Arizona State Schools for the Deaf and Blind for the state pay raise.

## Collaboration

Goal: Become the key advisory body to the Governor on blindness and visual impairment.

Activities: The Council continues to submit periodic reports to the Governor through her public policy advisor liaison on activities related to the Council and needs of the blindness community.

## Service Enhancements:

Goal: Blind and visually impaired individuals living in rural areas and tribal communities will receive programs and services that are consistent with programs in metro areas.

Activities: The Council continues to support and advocate for financial support of independent Indian rehabilitation programs, providing opportunities to participate in training

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<sup>4</sup> Journal of Visual Impairment & Blindness, January 2003

sessions, and providing information through the listserv for education and employment opportunities, along with outreach activities in rural areas.

## Vision Rehabilitation and Technology Expo (VRATE)

The Council continued to partner and collaborate as a co-sponsor of the annual **Vision Rehabilitation and Technology Expo** (formerly known as the Technology in Education and Employment Conference). Prior to 2001,



Terri Hedgpeth, Arizona State University, Disability Services

there were three major

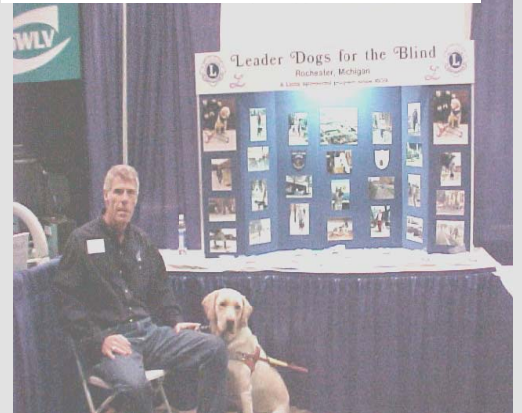
and separate community events focused on the blindness community. The Council, in partnership with other organizations, elected to collaborate with the various organizations to provide one

program to focus on technology along

with services and advocacy. Partners include **The Foundation for Blind Children, Arizona Center for the Blind and Visually Impaired, City of Phoenix Special Needs Library, Sun Sounds of Arizona, Arizona State Braille and Talking Book Library, Telephone Pioneers, Foundation Fighting Blindness, ViewFinder, Low Vision Plus, Rehabilitation Instructional Services, and the Lions Foundation.**

The conference has been offered free of charge to the public, and planning for the 2003 event has already begun.

Exhibitor, Larry Colbert of Leader Dogs for the Blind, VRATE 2002



## Related Activities

As the Governor's Advisory Council, members have met with state legislators, RSA Administration, consumers, the Governor's Office, and others to discuss the needs, concerns, and services of the blindness community. The types of services, quantity, quality and accessibility to services, as well as the atmosphere in which these services are provided, is critical to people who are blind and their families.



2002 VRATE Exhibitor,  
Low Vision Plus

## Orientation to Blindness

### Services:

The Council continues to agree and support the need for Orientation to Blindness Services in Arizona, including residential center-based services, itinerant and home-based services. Research has demonstrated that people who have lost or are losing their vision, develop the confidence and basic skills necessary to become independent through these services. This need will continue to be a priority in the coming years, particularly as the elderly population continues to grow.

## Compensatory Skills

If you're blind and want to maintain your independence, how does someone learn the skills that are necessary to accomplish the activities of daily living? Through a variety of services such as Orientation and Mobility Specialists, Rehabilitation Teachers, Low Vision Specialists and Teachers of the Visually Impaired, these instructors teach the necessary compensatory skills to perform daily tasks others do by sight. Orientation and Mobility (O&M) instruction provides training that allows an individual to travel independently whether as a low vision traveler using a monocular, or a blind traveler using a cane or dog guide. Rehabilitation Teachers provide instruction in daily living skills such as adaptive cooking skills or managing finances. Low Vision Specialists provide direct instruction in the use of distance and near magnification aids, optimal lighting conditions, and reading postures to maximize a person's use of their residual vision. Teachers of the Visually Impaired provide instruction in braille, abacus, adapted technology, and alternative format materials to allow blind and visually impaired students to access textbook materials. The GCBVI has advocated for the passage of legislation that will continue to support these vital services for children and adults with vision loss.

Financial support for these services continues to lag far behind the need. With the need for vision related rehabilitation services expected to double by the year 2030, only a fraction of the eligible population are expected to receive needed services.

Services that allow people to maintain their independence rather than move to a nursing home or other more costly institutionalized setting are critical. Despite the benefits O&M, RT and LVT services provide, Medicare, Medicaid and other health insurance companies do not cover these services. The self-confidence and skills older people acquire as a result of the Independent Living program translates into less assistance from more costly and extensive services.<sup>5</sup>

### **Council's Impact on Individuals**

The work of the GCBVI has a direct impact on individuals living in Arizona. The following are only a few examples of how the council's work has directly impacted the lives of people with vision loss.

**Kurt Herten** Finishing up champion seasons in 1991 and 1992 as a baseball player for Cal State Fullerton Kurt Herten was devastated when he lost his eyesight due to complications from injuries received in a car accident. The depression and loss he suffered was sometimes too overwhelming. Learning to live with blindness and recognizing that life exists after blindness is one of the biggest hurdles when faced with Kurt's circumstances. Adjustment Services provide Kurt and others with the tools needed live independently. In Kurt's instance, he not only adjusted to his blindness, but has become an entrepreneur with the Business Enterprise Program (BEP), a program offered through the DES Rehabilitation Services Administration. Kurt received training in repairing, maintaining, and operating coin operated vending machines. Kurt has worked hard and expanded his business from thirty eight to 95 machines, and has been recognized twice as "Vending Operator of

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<sup>5</sup> American Foundation for the Blind

the Year” and honored with the **BEP “Positive Image” Award.**



Kurt Herten Named Vending Operator of the Year 2002, and winner of the "BEP Positive Image Award"

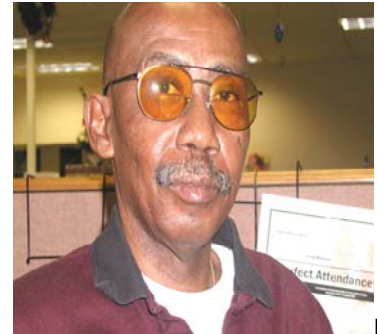
He is proud to say "My life is better now than it ever has been. I feel good about myself, and feel an integral part of the community".

**"KC"** was a typical third grade student until she lost both of her eyes to Retinoblastoma, a form of cancer. Loss of vision can be devastating for a family. KC and her family were provided with family counseling to help them grieve and then to understand that KC's life would be just as good, even if she did do things differently. KC was provided instruction in Braille, abacus and computer skills along with adaptive aids that allowed her to continue to learn in the same class with her friends just as before she lost her sight. An Orientation and Mobility Specialist taught her how to travel to her school and neighborhood safely, and a Rehabilitation Teacher came into the home to teach her cooking, identification of clothing, and made modification to appliances so she would be able to perform daily skills in independent living. As a fifth grade student KC continues to receive instruction in a variety of



compensatory areas while participating fully as a student on campus, participating in band, maintaining a high grade point average, and going to friends' houses to play. She has a strong interest in science and hopes to be an inventor.

**Ivan Burrell** has been successfully employed for many years and just happens to be legally blind. After experiencing decreased functioning in his eyesight, Ivan noticed that his job performance was slipping. After speaking with his employer, Sears National Bank, the Human Resources Department contacted the Arizona Industries for the Blind (AIB) for assistance in finding a way to improve his productivity so they could retain Ivan as an associate. The worksite evaluation indicated Ivan would need comprehensive services and he was encouraged to apply to the Vocational Rehabilitation Program for assistance to maintain his employment. Ivan reports that his VR counselor, the AIB Employer Services Specialist, along with the Human Resources Department of Sears National Bank, all worked together to explore assistive technology and other training that might provide a solution for maintaining his employment. Ivan indicated his experience with the VR Program showed him how everyone working as a team came together to develop a plan to provide the necessary services. Ivan's employer agreed to provide the Braille training at the worksite, and VR would provide the software, hardware and assistive technology upgrades to assist him to maintain his employment by performing his job duties effectively and efficiently. "Knowing that my employer recognizes and values retaining



Ivan Burrell, Former  
VR Consumer

employees with disabilities, such as myself, makes me happy to work here. I like my job and the people I work with”.

**Judy Cooper – Former DES, Rehabilitation Services  
Administration Vocational Rehabilitation Program**



**Judy Cooper, former VR  
Participant employed by AIB**

**Participant** Blinded from the effects of Glaucoma in 1995, Judy Cooper thought her life was over, and never thought she would work again.

Through the assistance of the Adjustment to Blindness Services and the Vocational Rehabilitation Program (programs within the DES, Rehabilitation Services

Administration) Judy again was given hope for her future. Hired by the **Arizona Industries for the Blind** (AIB), Judy was able to use the skills she learned as a young girl to gain employment as a seamstress at the AIB. Now a full-time employee, Judy states she is growing more independent every day and liking it! Judy said “the best part of my job is the people I work with; they make it all worth while”.

**Sylvia Alvarez (No Picture Available)** A former participant of the **DES, Rehabilitation Instructional Services Program**

One day while completing her daily errands, Sylvia Alvarez, a young woman in her mid thirties at the time, began noticing that the street signs were becoming more and more difficult to read. In fact, the difficulty with her eyesight was so concerning that she made a visit to her ophthalmologist. Sylvia’s suspicions were confirmed when her doctor diagnosed her with a progressive eye disorder known as Retinitis Pigmentosa.<sup>6</sup> Over

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<sup>6</sup> See Appendix I for definitions of eye diseases.

the next several years her peripheral vision decreased to the point of legal blindness. As her eyesight diminished, Sylvia noticed she needed more assistance from her husband and family to complete her daily routine of cooking, cleaning and other tasks. One of Sylvia's daughters, a schoolteacher, heard about the Rehabilitation Instructional Services (RIS) from a friend whose mother had benefited from services, and shared with Sylvia their experience with RIS. Sylvia immediately called RIS and began receiving services such as Orientation and Mobility (O&M) that would teach her to travel safely and independently using a long cane. Sylvia described her experience with learning to travel as "kind of exciting and kind of scary at the time". Sylvia reported that the best thing about the training was that she found she could travel by herself independently!

Sylvia also received instructions in her home through visits from a Rehabilitation Teacher (RT) who taught her adaptive techniques for accomplishing her daily tasks and routine. Sylvia and her RT identified and acquired adaptive tools and devices that would aid her in completing her daily activities as a homemaker. Sylvia said of the RIS training, "Now I don't have to depend on other people so much. I have time to help my daughter baby-sit. Only now, I get to do the cuddling."

Services such as those described above and provided by the state through the DES Division of Employment and Rehabilitation Services, community providers, agencies, and schools, are imperative for blind and visually impaired individuals in order to maintain their independence.

## APPENDIX I

### GCBVI FINANCIAL STATEMENT

	<u>Federal Money</u>	<u>State Match</u>	<u>Total Funds</u>
Council Support Services Alternative Format	450	50	500
Council Special Projects VRATE Annual Report Brochure Public Education	2,520	280	2,800
Total Federal	2,970	330	3,300
Governor's Office	<u>Federal</u>	<u>State</u>	<u>Total</u>
Council Travel	0	1,750	1,750
Council Training/ Education	0	2,500	2,500
Total	0	4,250	4,250

# APPENDIX II

## Common Types of Vision Loss

The following is a list of just a few of the causes of vision impairment and blindness. This list is not meant to be all-inclusive:

**Age-Related Macular Degeneration** (ARMD) is the leading cause of vision loss among older Americans. ARMD causes a loss of central vision and a reduced acuity of 20/200 or worse. Currently there are approximately 5.5 million people ages 55 or older that suffer from this disease and this population is soon expected to exceed 6.3 million.<sup>7</sup> There are no known treatments that can prevent macular degeneration or restore vision once it is lost.

### **Albinism**

This results from a lack of pigment, which is hereditary, and may affect the eyes, skin or hair, or all three. People with albinism typically have acuities between 20/200 and 20/125, are photophobic and extremely sensitive to the sun.

### **Cataracts**

A result of the lens of the eye becoming cloudy or opaque. This may involve the entire lens or just a small area of the lens. Older individuals with cataracts only can often have the lens removed and replaced with an artificial one. Cataracts in children can be more complicated and secondary glaucoma is often a concern. Even with the successful replacement of the cataract with an artificial lens, the individual has lost the ability to accommodate (adjust focus for various distances) and will need to wear reading glasses.

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<sup>7</sup> Upshaw Institute for the Blind, 1998

## **Diabetic Retinopathy**

One of the leading causes of blindness among adults, Diabetic Retinopathy, is one of the side effects of long-term insulin-dependent diabetes. Blood vessels begin to grow uncontrollably within the eye causing hemorrhages, field loss and retinal detachments. Laser surgery can delay the progression but there is no cure. Studies indicate that those who maintain healthy blood sugar levels over several years are at a lower risk for all diabetes-related conditions, including Diabetic Retinopathy.

## **Glaucoma**

This is a condition resulting from an increase of pressure inside the eye, often from improper drainage of fluids. The increased pressure can cause damage to eye structures such as the optic nerve and retinal cells. Medications and surgery can slow or halt the progression of the disease. In children, this is often difficult and it is common for the eye to have to be removed at the end stage of the disease.

## **Optic Nerve Hypoplasia**

This condition is caused by the underdevelopment of the optic nerve during a baby's development in the womb. The optic nerve sends visual messages to the brain for processing. Because the nerves are not fully developed the result is reduced visual field and acuity. A similar condition, Optic Nerve Atrophy, is caused by trauma and results in the same functional condition. The degree of damage to the optic nerve will relate to the extent of field loss.

## **Retinitis Pigmentosa**

One of the leading causes of blindness, RP is a family of retinal diseases including Leber's Congenital Amaurosis, Rod-Cone Dystrophy, Cone Dystrophies, and Ushers Syndrome. Although the specifics of each condition may be different, all cause loss

of night vision, peripheral fields and are either genetic or hereditary in nature. There are studies related to retinal implants to restore vision currently underway. Ushers Syndrome is the result of RP plus deafness.

### **Retinopathy of Prematurity**

Vision is the last of our senses to develop and premature infants will not have had the opportunity to fully develop their visual system. Infants most at risk are those born before 32 weeks gestation and weighing less than 1000g. There are five stages of ROP from Stage I, which is only a visual scar on the retina. This does not impact vision until stage V, which includes total retinal detachments. Laser surgery can be successful in minor stages of ROP to save vision.

## **APPENDIX III**

### **Prevalence Rates and Vision Loss**

Nationally, there are over 10 million individuals with visual impairments. Of this number, 5.5 million are over age 55. And there are over 1.3 million Americans who are legally blind.<sup>8</sup> Students account for approximately 93,600, with an estimated 10,800 who are deaf-blind. (Student is defined as 0-21 years of age.)

What does this mean for Arizona? Estimates indicate there are currently approximately 143,000 Arizonans who are visually impaired, and approximately 22,000 legally blind. Children and students in Arizona comprise an estimated 7,400 visually impaired and 1,500 legally blind. Why is this important to Arizona? According to a report completed by Jennifer Bell, et al, it is vitally important for children with low vision to

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<sup>8</sup> American Foundation for the Blind

experience as much of their world as possible in order to learn what sighted children learn. Vision is an organizing sense that allows us to perceive objects at a distance and to make connections between objects. Concepts developed in childhood are learned incidentally through vision. When the visual sense is impaired, concepts may be incompletely developed or missed entirely.

Children and students today continue to experience a delay in receiving their textbooks at the same time as their sighted peers, because their materials must be converted to an alternative format. This creates an un-level playing field our young people must face. Yet, a simple floppy disk or compact disk could ameliorate this if all textbook publishers were required to provide alternative format.

The following charts clearly reflect that in Arizona, vision loss is everyone's business. It's not just the individual and family members that are affected, but the impact of public policy makers, employers, professionals, schools and service providers all play an important role. In addition, as people live longer and the baby boom generation reaches retirement, the number of people living in Arizona who are blind or visually impaired increases dramatically over time, as reflected in the Arizona Estimated Prevalence Rate Charts.



**Arizona Estimated Prevalence of  
Visual Impairment for 2001**

<b>Age in Years</b>	<b>Total Population*</b>	<b>Prevalence Rates**</b>	<b>Prevalence Estimates</b>
0-19	1,468,773	.005	7,343
20-44	1,818,776	.014	25,462
45-54	644,990	.026	16,769
55-64	429,107	.04	17,164
65-74	373,554	.064	23,907
75-84	257,981	.119	30,699
85 and up	87,954	.24	21,108
<b>Total Arizona Population</b>	5,080,775	<b>Total Estimated Visually Impaired Population</b>	142,452

**Arizona Estimated Prevalence of Visual Impairment for  
2010**

<b>Age in Years</b>	<b>Total Population*</b>	<b>Prevalence Rates**</b>	<b>Prevalence Estimates</b>
0-19	1,687,440	.005	8,437
20-44	2,012,420	.014	28,173
45-54	852,749	.026	22,171
55-64	683,945	.04	27,357
65-74	465,855	.064	29,814
75-84	309,749	.119	36,860
85 and up	132,950	.24	31,908
<b>Total Arizona Population</b>	6,145,108	<b>Total Estimated Visually Impaired Population</b>	184,720

Notes:\* Arizona 2001 and 2010 population figures based on Department of Economic Security Population Statistics Unit Projection 1997-2050, Projection Report #2 dated February 1997. Visual impairment prevalence rates were prepared by American Foundation for the Blind, Programs, and Policy Research Department based on U.S. Census Bureau data from the Survey of Income & Program Participation. **REFERENCES:**Kirchner, C. *American Foundation for the Blind*

**Arizona Estimated Prevalence of Legal  
Blindness for 2001**

<b>Age in Years</b>	<b>Total Population*</b>	<b>Prevalence Rates**</b>	<b>Prevalence Estimates</b>
0-19	1,468,773	.001	1,468
20-44	1,818,776	.002	3,637
45-54	644,990	.004	2,579
55-64	429,107	.001	429
65-74	373,554	.011	4,109
75-84	257,981	.019	4,901
85 and up	87,954	.054	4,749
<b>Total Arizona Population</b>	5,080,775	<b>Total Estimated Legally Blind Population</b>	21,872

**Arizona Estimated Prevalence  
of Legal Blindness for 2010**

<b>Age in Years</b>	<b>Total Population*</b>	<b>Prevalence Rates**</b>	<b>Prevalence Estimates</b>
0-19	1,468,773	.001	1,687
20-44	1,818,776	.002	4,024
45-54	644,990	.004	3,410
55-64	429,107	.001	683
65-74	373,554	.011	5,124
75-84	257,981	.019	5,885
85 and up	87,954	.054	7,179
<b>Total Arizona Population</b>	5,080,775	<b>Total Estimated Legally Blind Population</b>	27,992

Notes:\* Arizona 2001 and 2010 population figures based on Department of Economic Security Population Statistics Unit Projection 1997-2050, Projection Report #2 dated February 1997. \*\* Rates derived from "Federal Budgetary Costs of Blindness" Chiang, et. al., Milbank Quarterly Volume 70, #2, 1992.

**REFERENCES:** Kirchner, C. American Foundation for the Blind. *American Foundation for the Blind*

## APPENDIX IV

### Highlights of Past Accomplishments

- Successfully accomplished passage of HB 2613
- Successfully lobbied for increased state funding for older blind programs ***(Permanent funding of \$425,000 had been added to the DES budget in SFY 2001 for Independent Living Services (ILRS) but due to budget cuts this program sustained a permanent reduction of \$100,000 beginning SFY 2003- Senator Pete Rios was instrumental in holding harmless the ILRS funding for blind services for the remainder of SFY 2003. Future funding for this activity may be at risk and will require diligence on the part of the blindness community to ensure funding of ILRS services for the blind does not take a proportionately larger reduction than other programs.)***
- Successfully supported an across the board pay increase for rehabilitation counselors employed by the Department of Economic Security, Division of Employment and Rehabilitation Services,
- Advocated for adequately trained and sufficient numbers of qualified professional staff in the field of rehabilitation teaching,
- Co-sponsored the annual Vision Rehabilitation and Technology Conference (VRATE),
- Established a workgroup to research the need for additional Residential Adjustment to Blindness Services,
- Involved in reviewing the Braille bill for implementation,
- Obtained and Implemented a Council Budget,
- Conducted training seminars for professionals and technicians,
- Supported the opening of the Tucson Veterans Rehab Center for the Blind,
- Supported tenuring of U of A personnel prep position dollars in visual impairment and stabilization of program,
- Collaborated with the Council of Councils,
- Supported successful passage of a referendum for improving transportation in the greater Phoenix area,
- Created Quality Criteria Implementation Teams,
- Supported increased services for children at the Arizona School for the Deaf and the Blind,
- Created a forum for discussion of issues related to blind/visually impaired and in so doing, stabilized relations among the Council members.

## Future Activities of the GCBVI

The Governor's Council on Blindness and Visual Impairment will continue to:

- Co-sponsor an annual technology conference,
- Work on developing regulations to implement the Braille Bill,
- Conduct training seminars,
- Collaborate with Council of Councils,
- Drive policy for state services,
- Support increased services for children in Arizona,
- Support access to public transportation,
- Support funding of full state match for the VR Program,
- Support funding for Assistive Technology to allow access to print and electronic information necessary for education and employment,
- Continue to advocate for quality services and adequate numbers of properly trained personnel to provide services.

## **APPENDIX V**

### **Current Members of the Governor's Council on Blindness and Visual Impairment**

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**APPENDIX VI****GCBVI COMMITTEES****Education:**

Committee Chair: Jay Taska

Committee Members: Ken Randall, Ed House, Dick Drow, Jane  
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Carl Hoxeng



**Service Enhancements:**

Committee Chair: Sandra Stirnweis

Committee Members: Dan Martinez, Nicole Jeffords, Ruth Swenson, Sandie Addy, Lynne Noon.

**Public Relations:**

Committee Chair: Linda Montgomery

Committee Members: David Wayne Smith, Ann Somerville, Tom Simmons, Katherine Cecala, Ruth Druding, Jim Vale, Nicole Jeffords, Lynne Noon

**Collaboration:**

Committee Chair: Bill Pasco

Committee Members: Dan Martinez, Sandra Stirnweis, Sandie Addy, Gail Elaine Irons

**Standing Committees****Legislative Oversight:**

Committee Chair: Jim Vale

Committee Members: David Wayne Smith, Ruth Swenson, Elaine Baldrige

**Nominating Committee:**

Committee Chair: Katherine Cecala

Committee Members: Jay Taska, Jim Vale

**Executive Committee:**

Tom Simmons, Bill Pasco, Bob Kresmer

**Please Note:** The Governor's Council on Blindness and Visual Impairment meets every other month on the third Friday of the month starting with January. You do not have to be a Council member to attend the meetings, **or** to participate on a committee. You may contact the Council Chair or Staff for further information.

The Governor's Council on Blindness and Visual Impairment through the Rehabilitation Services Administration complies with all provisions of the Civil Rights Act of 1964, the Rehabilitation Act of 1973, as amended, and the Americans with Disabilities Act of 1990.

To request this document in alternative formats, please contact RSA at 602.542.3332, or outside Maricopa County 1.800.563.1221, and TTY 602.542.6049 or 602.542.3778 FAX.

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